

**CHEMICAL DEPENDENCY
TRANSITIONAL LIVING CENTER**

ALTERNATIVE YOUTH CARE LLC

4880 HIGHWAY 93 SOUTH

KALISPELL MT 59901-

Phone: 854-2044 **Fax:** 857-2503

Administrator: RICHARD BALAS

Current License Duration: 1

Licensed Beds: **20**

Health Planning Region Number: **5**

Certificate of Approval Number: 275-07

Freestanding Beds:

Facility ID Number

181

County: **FLATHEAD**

JCAHO:

LicenseNumber: **10789**

Exp. Date: **08/01/2007**

NOT PROV

Original License Date:

Detox Beds:

Total Facilities = 1